

WATER WELL REPORT

JAN]] 2013

FOR AN EXISTING WELL Wagon while Home Park April

Use this form if an original water well report was NEVER filed or is MISSING from Ecology records. Waqon Ecology records. Wagon Wheel Well #2 Polt water System 920707 YOUR WELL MUST BE PROPERLY TAGGED PRIOR TO SUBMITTING THIS FORM. Please fill in all blanks as sumple tell in all blanks as sumpl possible. If information is not known leave blank, After completing, mail the original form to: WA State Department of Ecology, PO Box 47600, Olympia, WA, 98504-7600, ATTN: Marian Bruner. CURRENT USE: D Domestic Industrial Municipal Unique Ecology Well ID Tag No. BCB779 ☐ DeWater ☐ Irrigation ☐ Test Well ☐ Other Water Right? If yes, attach copy ☐ Yes ☐ No DIMENSIONS: Diameter of well b inches. Property Owner Name AL Verbaranse Depth of completed well 3/2 ft. if known. Well Street Address Heller Road CONSTRUCTION DETAILS D Yes □ No □ Unknown Liner installed City Oak - Harbor County: 1 Stand M Steel Concrete Liner Other Unknown Type: D PVC Tax Parcel No. □ Yes □ No □ Unknown Perforations LOCATION SIZE of perfs in. by ____in. and no. of perfs ____ from An accurate location of your well is very important. The Township, Range, Section and 1/4, 1/4 can be found on your legal description or through yor Screens: WYes DNo DUnknown Mf's name county assessor's office. □ Stainless Steel □ PVC DOther Bunss EWM Type: or WWM Slot Size 2 5 from 302 ft. to 312 ft. Gravel/Filter Packed: ☐ Yes ☐ No ☐ Unknown D Materials paced from This square represents Surface Seal: Yes WNo Unknown If know, to what depth one section of land. E G H which is approx. 640 acres. Within this ☐ Bentonite section, circle the letter PUMP: D Yes that best represents the □ No Mffr's Name J. location of the well within this section. R WATER LEVELS: Land-surface elevation above mean sea Latitude/Longitude Note: Section, Township, Range still REQUIRED Static Level 2 42 ft. below top of casing Lat Min/Sect 18, 99623 Artesian pressure _lbs. per square inch Date measured Lat Deg Well head has cap? ☐ Yes ☐ No Long Min/Sect 4(), 17()/4 Shut off valve? ☐ Yes ☐ No Long Deg FF GPS ☐ Survey WELL TESTS: Drawdown is amount water level is lowered below static level. ☐ Topographic Map ☐ Computer Generated Was a pump test made? I Yes I No If yes, attach copy Additional Information, if available: □ Unknown Location marked on topographic map (please attach) Yield: 7, 5 gal/min. with 10 ft. drawdown after Location marked on air photo (please attach) CERTIFICATION: The information reported above is true to the best of my knowledge and belief. ☐ Engineer ☐ Property Owner ☐ Other Drilling Company WHID BEY WELL DRILLERS. Boorstra Signature Address of person completing this form: 716 HOLbrook Rd Driller License No.

Date Signed

City, State, Zip Coupe VILLE WA 98139

